

Chorley Rural District Council.

Medical Officer of Health's
REPORT.

1911.



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CHORLEY,

FEBRUARY, 1912.

TO THE CHORLEY RURAL DISTRICT COUNCIL.

GENTLEMEN,

In presenting my thirty-sixth Annual Report as Medical Officer of Health to the Chorley Rural District Council and to your predecessors, the Rural Sanitary Committee of the Board of Guardians, I am sorry that I am not able to give as satisfactory statistics as I have been enabled to do in several of my latter reports, despite of all the marked sanitary improvements that have been carried out by your orders and under your directions.

The Birth rate in 1911 was certainly slightly higher than that of 1910, but much below the rates previously estimated in your District, whilst the Death rate, obtained from Deaths registered, of 1911 was markedly in excess of that of 1910, and those of several years preceding 1910.

The census of the population having been taken during the past year, I am able to give you more accurate statistics than has been possible during the last few years, and I have corrected in the various tables in this Report the statistics of the last five years according to the census of the population held in 1911.

I give below the population of each sub-district at the census of 1901, my estimate of such population for the middle of 1910, and the census returns of 1911.

Sub-District.	Census, 1901.	Estimate, 1910.	Census, 1911.
Chorley	4552	6100	6205
Brindle	3341	3450	3220
Croston	4115	4600	4459
Leyland	4868	5350	5084
Rivington	2434	2300	2526
Chorley Rural District ...	19310	21800	21494

Compared with the population ascertained in each sub-district in 1901, the census returns of 1911 show an increase in each sub-district except Brindle, and this increase is much the most marked in the Chorley sub-district, owing to the rapid increase of population in Coppull.

Four hundred and ninety-five (495) Births were registered in the Chorley Rural District during 1911. The Birth rate, calculated from the estimated population of the district on July 1st, 1911, was accordingly 23.02 per thousand.

Two hundred and twenty-seven (227) Boys and two hundred and sixty-eight (268) Girls were born during the year, and thirteen (13) Births were illegitimate, less than three per cent. of the whole number of Births.

The Birth rate during 1911, though slightly higher than that of 1910, was considerably lower than the average of the preceding five years.

The highest Birth rates obtained in the Chorley and Croston sub-districts, that of Leyland sub-district was about the average for the whole district, whilst the Birth rates of Brindle and Rivington sub-districts were considerably below the average for the Chorley Rural District.

I give in the following, Table A, the number of Births and the Birth rates of each of the sub-districts during 1911, and each of the preceding five years.

TABLE A.

Sub-District.	1911.		1910.		1909.		1908.		1907.		1906.	
	Number of Births.	Birth Rate.	Number of Births.	Birth Rate.	Number of Births.	Birth Rate.	Number of Births.	Birth Rate.	Number of Births.	Birth Rate.	Number of Births.	Birth Rate.
Chorley ...	153	24.6	170	28.4	191	33.1	164	29.6	170	31.5	172	33.2
Brindle ...	69	21.5	50	15.5	84	25.9	68	20.9	69	21.1	79	24.2
Croston ...	102	25.1	95	21.5	115	26.1	113	25.9	109	25.1	100	23.1
Leyland ...	119	23.4	122	24.1	118	23.3	135	26.8	113	22.5	133	26.7
Rivington ...	52	20.1	39	15.5	50	19.9	50	20.0	52	20.9	56	22.6
Totals ...	495	23.02	476	22.4	558	26.6	530	25.5	513	25.0	540	26.6

The Birth rate throughout England and Wales in 1911 was 24.4 per thousand, and was the lowest on record.

The Birth rate in your district was, however, 1.3 per thousand lower than the average rate for the country.

Three hundred and twenty (320) Deaths were registered in the Chorley Rural District during 1911. I estimate the Death rate, as regards Registered Deaths, at 14.88 per thousand per annum.

The Death rate for England and Wales in 1911 was 14.6 per thousand, very nearly the same as that obtaining in your district.

For the six years prior to 1911, in my Annual Reports, I have given you the number of Deaths of Residents and the Death rate of Residents, excluding in these numbers all the Deaths of Non-residents occurring in the Isolation Hospital, but including the Deaths of Residents in your district which occurred in Hospitals or Public Institutions outside the district.

In this and future Reports, I am directed to include amongst the Deaths of Residents not only those of persons usually resident in your district who have died in Public Institutions, but also the Deaths of any persons who, *having a fixed or usual residence in your district*, have died outside the Chorley Rural District. The Registrar-General sends some months after the end of the Quarter a list of Deaths of residents dying outside the district, and I have included in these statistics all the Deaths of which I have been informed.

I find that eighteen (18) Deaths of Non-residents have been registered in the Chorley Rural District, whilst nineteen (19) Residents have died outside your district. The nett number of Deaths of Residents is accordingly three hundred and twenty-one (321), and the Death rate of residents 14.93 per thousand per annum.

One hundred and sixty-one (161) Males and one hundred and sixty (160) Females resident in the district died during 1911.

In Table B I give the Deaths of Residents and the Death rates of each sub-district in 1911 and the five preceding years.

TABLE B.

Sub-District.	1911.		1910.		1909.		1908.		1907.		1906.	
	Number of Deaths.	Death Rate.	Number of Deaths.	Death Rate.	Number of Deaths.	Death Rate.	Number of Deaths.	Death Rate.	Number of Deaths.	Death Rate.	Number of Deaths.	Death Rate.
Chorley ...	94	15.1	80	13.3	93	16.1	71	12.7	83	15.4	61	11.6
Brindle ...	49	15.2	34	10.5	59	18.2	*43	13.2	61	18.6	46	14.1
Croston ...	66	14.8	50	11.3	48	10.9	70	15.9	59	13.5	47	10.9
Leyland ...	80	15.7	79	15.6	70	13.8	75	14.9	78	15.6	81	16.3
Rivington ...	32	12.7	26	10.3	31	12.3	46	18.4	28	11.2	36	14.5
Totals ...	321	14.93	269	12.66	301	14.34	305	14.70	309	15.05	271	13.35

I am now required by the Local Government Board to adopt a different grouping of ages at which the Deaths of Residents occurred, sub-dividing Group 2 into Deaths between one and two and two and five years, and Group 5 into Deaths between twenty-five and forty-five and forty-five and sixty-five years. The numbers of Deaths for 1911 under each Group will be seen in Table III., Local Government Board Tables. But in order to compare the statistics of 1911 with the preceding years, I have arranged in Table C the Deaths in 1911 and the five preceding years under the age groups as previously employed.

TABLE C.

Year.	Deaths of Residents at Subjoined Ages.						Total.
	Group 1. Under 1 Year.	Group 2. 1 and under 5.	Group 3. 5 and under 15.	Group 4. 15 and under 25	Group 5. 25 and under 65.	Group 6. 65 and upwards.	
1911	54	36	23	13	113	82	321
1910	55	28	11	15	83	77	269
1909	48	26	7	9	119	92	301
1908	56	26	19	15	102	87	305
1907	57	27	22	19	101	83	309
1906	63	23	12	10	95	68	271
Average of five years, 1906—1910.	56	26	14	14	100	81	291

Compared with the average of the five preceding years, the number of Deaths in 1911 in children between one and five years and between five and fifteen, and adults between twenty-five and sixty-five, show a decided increase over the average, whilst in the other groups the numbers are about the average, though there was a slight decrease in the number of Deaths under one year of age.

If the number of Deaths in 1911 under each age group are compared with those in the same group in 1910, you will see that there is a similar increase to that which obtains when the numbers for 1911 are compared with the averages of the five years, except that the number of Deaths of adults between twenty-five and sixty-five shows a larger increase, and there is also an increase of old-age Deaths.

The Infantile Mortality calculated from the number of Deaths under one year of age and the number of Births registered was, in 1911, one hundred and nine (109) per thousand Births.

The average Infantile Mortality for the preceding five years was one hundred and seven (107) per thousand, so you see that in 1911 the Infantile Mortality was about the average, and considerably less than that of the preceding year 1910, viz, one hundred and sixteen (116) per thousand. Had it not been for the unusual prevalence of Diarrhoea and Enteritis amongst Infants in 1911, the Infantile Mortality would have been almost the lowest on record.

In Table I., Local Government Board Tables, you will see the Infantile Mortality of 1911 and each of the five preceding years.

The Infantile Mortality throughout England and Wales in 1911 was one hundred and thirty (130) per thousand Births, that is to say, twenty-one (21) per thousand more than obtained in your district.

The Chorley sub-district yielded the highest Infantile Mortality, viz, one hundred and sixty-three (163) per thousand; Leyland sub-district gave one hundred and eighteen (118), Rivington ninety-six (96), Brindle seventy-two (72), and Croston only forty-nine (49) per thousand.

The high Infantile Mortality in Chorley sub-district was due to the great number of Infantile Deaths in Coppull, nearly half of which were due to Diarrhoea.

In Table IV. (Local Government Tables) are detailed the various causes to which these Infantile Deaths were due, and the ages in weeks or months at which Deaths occurred are also given.

Two (2) Deaths occurred from Infectious Diseases, viz, Measles, sixteen (16) from Diarrhoeal Diseases, one (1) from Tubercular Disease, seventeen (17) from Premature Birth, Malformation, or Congenital Debility, and eighteen (18) from other causes, including four (4) from Bronchitis, and five (5) from Pneumonia.

Ten (10) Infants died in the first week, twenty (20) in the first month, and thirty-four (34) between one and twelve months of age. Three (3) Deaths of Illegitimate Infants were registered, giving the Infantile Mortality of Illegitimate Infants of two hundred and thirty-one (231) per one thousand Births, as compared with the Infantile Mortality of Legitimate Infants of one hundred and two (102).

In Table D I arrange the Deaths of residents in the Chorley Rural Districts during 1911 under the respective causes to which they were due, and compare them with the numbers of Deaths due to the same causes in each of the five preceding years, and also with the average number of Deaths during those five years due to each cause.

It may be seen from this Table that whilst the numbers of Deaths due to Phthisis Pulmonalis and Influenza were below the average, the Deaths due to Measles, Scarlet Fever, Typhoid Fever, Lung Diseases, other Tubercular Diseases, and especially Diarrhoea and Enteritis, were more than the average of the preceding five years.

In comparison with 1910, more Deaths occurred in 1911 from Measles, Scarlet Fever, Diphtheria and Typhoid Fever, Lung Diseases, Diarrhoea, and other causes not specified, whilst fewer Deaths occurred from Phthisis and Whooping Cough.

TABLE D.

Cause of Death.	1911. Number of Deaths.	Average five years 1906-1910.	1910. Number of Deaths.	1909. Number of Deaths.	1908. Number of Deaths.	1907. Number of Deaths.	1906. Number of Deaths.
Measles	6	2.4	3	...	...	9	...
Scarlet Fever ...	5	1.4	1	2	1	...	3
Whooping Cough ...	...	2.8	4	2	2	5	1
Diphtheria and Mem- branous Croup ...	6	6.6	2	7	9	9	6
Enteric Fever ...	4	1.8	2	1	4	...	2
Influenza	1	4.6	...	6	7	7	3
Diarrhoea and Enteritis	26	10.0	9	11	14	7	9
Puerperal Fever ...	...	0.6	...	...	1	...	2
Erysipelas ... ..	...	0.6	...	...	1	1	1
Phthisis Pulmonalis...	12	17.0	17	18	14	23	13
Other Tubercular Diseases	12	7.4	10	6	11	4	6
Cancer	20	18.8	22	23	17	16	16
Bronchitis	23	18.0	20	17	17	22	14
Pneumonia	28	26.4	23	31	26	27	25
Other Respiratory Diseases	6	1.2	1	1	2	2	...
Alcoholism and Cirrhosis of Liver	5	3.4	5	5	2	5	...
Premature Birth ...	7	9.0	5	10	9	7	14
Accidents	11	12.0	9	6	15	12	18
Suicides	3	4.4	4	8	8	...	2
All other Causes ...	146	142.6	132	147	145	153	136
Totals	321	291.0	269	301	305	309	271

Forty-seven (47) Deaths occurred from Zymotic Diseases, viz, from Measles six (6), Scarlet Fever five (5), Diphtheria and Membranous Croup six (6), Typhoid Fever four (4), and Diarrhoea and Enteritis twenty-six (26).

The Zymotic Death rate in 1911 reached the high figure of 1.95 per thousand, as compared with 0.95 in 1910, 1.09 in 1909, 1.44 in 1908, 1.46 in 1907, and 1.03 in 1906, and with the average Zymotic Death rate for these preceding five years of 1.20.

The Zymotic Death rate of England and Wales in 1911 was 1.88, which closely approximates the rate obtaining in your district.

The increase in the Zymotic Death rate in 1911 was mainly due to the unusual prevalence of Diarrhoeal Diseases during the very hot months of August and September, when there were six (6) Deaths in August and fifteen (15) in September. Only three (3) Deaths from Diarrhoeal Diseases occurred during the cold season.

The fatal cases of Diarrhoea were most numerous in the Chorley sub-district, viz, sixteen (16), of which fourteen (14) were in Coppull.

One hundred and ninety-three (193) cases of Infectious Diseases, exclusive of Phthisis Pulmonalis, were notified to me during 1911. With the exception of that in 1902, this number of notifications was the largest since the adoption of the Notification of Diseases Act.

Scarlet Fever has been responsible for more than three-quarters of the number of notifications, and further on in my Report I will make some comments on the prevalence of this Disease.

In Table E I give the numbers of each Infectious Disease notified to me during 1911, and each of the ten preceding years, and also the average number of cases per year notified during the decade 1901-1910.

TABLE E.

Year.	Smallpox	Diphtheria and Membranous Croup.	Scarlet Fever.	Erysipelas.	Typhoid Fever.	Other con- tinued Fever.	Puer- peral Fever.	Totals.
1911	...	21	151	9	11	...	1	193
Average of Decade 19 1-1910.	0.4	27.8	70.5	21.6	14.6	0.3	1.2	136.4
1910	...	6	41	8	20	...	1	76
1909	...	18	42	4	12	...	...	76
1908	...	30	25	19	13	...	1	83
1907	...	52	19	11	5	...	...	87
1906	...	44	65	26	11	1	...	147
1905	...	22	61	24	12	1	...	120
1904	...	19	115	38	11	...	2	185
1903	4	15	86	21	20	...	1	147
1902	...	24	175	31	27	1	3	261
1901	...	48	76	34	15	...	4	177

You will see from the above Table that, Scarlet Fever excepted, fewer notifications have been received in 1911 in the case of each of the Infectious Diseases than the average number for the preceding decade, and

as compared with the numbers for 1910, whilst there has been a great increase in the notifications of Diphtheria and Scarlet Fever, there were fewer cases of Typhoid Fever in 1911 than in the preceding year.

Table II. (Local Government Board Tables) gives the total number of cases of each Infectious Disease notified during the year, the number of cases of each Infectious Disease occurring in each sub-district, and the total number of cases of Infectious Disease removed from each sub-district for treatment in the Chorley Joint Hospital, Heath Charnock.

I give in Table F the number of cases of each Infectious Disease notified from each township in the Chorley Rural District during 1911, and compare the total number of cases notified from each township in 1911 with the similar totals in each of the five preceding years.

TABLE F.

Townships.	Scarlet Fever.	Diphtheria and Membranous Croup.	Typhoid Fever.	Erysipelas.	Puerperal Fever.	Totals, 1911.	Totals, 1910.	Totals, 1909.	Totals, 1908.	Totals, 1907.	Totals, 1906.
Charnock Richard	3	...	...	...	...	3	1	2	2	...	5
Coppull ...	3	2	1	...	...	6	17	18	11	19	39
Duxbury ...	...	6	1	...	...	7	1	1	...	2	1
Heapey ...	...	...	1	...	...	1	5	3	...	...	2
Welch Whittle ...	1	1	...	...	...	2	...	...	5	...	1
Brindle ...	11	...	...	...	...	11	6	...	6	10	2
Hoghton ...	...	...	...	...	...	...	3	1	4	3	19
Wheelton ...	1	...	...	1	...	2	2	3	1	8	7
Bretherton ...	...	1	1	...	...	2	1	9	17	9	17
Eccleston ...	35	...	2	1	...	38	2	3	2	2	10
Heskin ...	7	2	1	...	...	10	14	...	4	1	4
Mawdesley ...	45	1	...	...	...	46	1	2	1	1	1
Ulnes Walton ...	...	...	...	1	..	1	4	...	2	...	...
Clayton-le-Woods	3	...	...	...	...	3	3	2	3	3	3
Cuerden... ..	...	1	...	...	...	1	...	1	...	1	...
Euxton ...	27	1	2	2	...	32	5	1	4	3	9
Whittle-le-Woods	11	2	.	1	1	15	6	17	10	11	12
Anderton ...	...	...	2	1	...	3	1	2	10	6	4
Anglezarke ..	...	...	...	...	..	...	...	...	...	...	...
Heath Charnock	4	4	...	2	...	10	4	10	5	4	9
Rivington ...	...	...	...	...	...	...	...	1	1	4	2
Totals ...	151	21	11	9	1	193	76	76	88	87	147

The number of Infectious Cases notified to me in the first Quarter of 1911 was thirty-three (33), in the second twenty (20), in the third twenty-six (26), and in the fourth Quarter one hundred and fourteen (114), of which latter number one hundred and four (104) were cases of Scarlet Fever.

No case of Ophthalmia Neonatorum was reported to me during the year.

In Table II. (Local Government Board Tables) I now include cases of Phthisis Pulmonalis reported to me by the Poor Law Medical Officers under the Regulations of the Local Government Board, 1908. Two (2) cases only were so notified to me during the year.

SMALLPOX.—For the eighth year in succession I have received no notification of this disease in your district. Ample provision for the isolation of Smallpox cases is arranged for by the Joint Hospital Board in Finnington Hospital, Hoghton. I regret that the increasing neglect of Vaccination is rendering the inhabitants in your district more liable to a spread of Smallpox should it be introduced into the locality from without, as has been the case on several occasions during the last thirty years.

SCARLET FEVER.—One hundred and fifty-one (151) cases of Scarlet Fever were reported to me during 1911. During the first Quarter of the year fourteen (14) cases were notified, thirteen (13) in the second, twenty (20) in the third, and one hundred and four (104) in the fourth Quarter.

Forty-five (45) cases were reported from Mawdesley, thirty-five (35) from Eccleston, twenty-seven (27) from Euxton, eleven (11) each from Brindle and Whittle, seven (7) from Heskin, four (4) from Heath Charnock, three (3) each from Charnock Richard, Coppull, and Clayton, and one (1) each from Welch Whittle and Wheelton.

In at least twenty (20) houses more than one case of this disease occurred, and the number of houses from which Scarlet Fever was notified was one hundred and ten (110).

Though cases of Scarlet Fever had been notified in the earlier parts of the year, notably from Euxton, it was not until the last Quarter that there was anything like an epidemic of this disease, when thirty-nine (39) cases were reported from Mawdesley, thirty-two (32) from Eccleston, nine (9) from Whittle, and seven (7) from Brindle.

The epidemic at Mawdesley and Eccleston was, I believe, caused by children attending school whilst still in an infectious condition, and I reported this to your Council. You instituted legal proceedings against the father of these children for failure to notify a case of Infectious Disease to the Medical Officer of Health, and also for exposure of children under his charge in a public place, viz, a school. The Magistrates dismissed the summons. I regret that the wording of the Public Health Act and the Notification of Diseases Act appears to require the prosecution to prove that a defendant is aware of the specific nature of an Infectious Disease in order to procure a conviction under either of these Acts, and that a reasonable inference from the circumstances of the case is not sufficient for the purpose.

Apart from this particular instance, it seems to me desirable that some alteration in the law should be made so that when any person suffering from, or having the charge of any person suffering from an infectious disease, fails to notify the existence of such disease or exposes such person in a public place, he should be compelled to show cause why he did not avail himself of the advice of his medical attendant when he was in doubt

about the nature of the disease from which he or his charge was suffering. During the last year I have had other cases of exposure of persons suffering from infectious diseases, and feel very strongly on the matter.

On my recommendation you closed all the schools at Mawdesley and the school at Eccleston during the prevalence of the fever, and I caused the schools to be thoroughly fumigated and disinfected.

Five (5) cases of Scarlet Fever died during the year, giving a case mortality of slightly over three per cent. Ninety-eight (98) cases were removed to the Isolation Hospital, all of which recovered, and fifty-three (53) cases were more or less well isolated at home. My deputy or myself visited each case and gave instructions to the parents about isolation, etc., and the houses and clothing were fumigated and disinfected at the termination of the case or upon the removal to Hospital.

The disinfection of the houses was carried out by the Caretakers of the Sewage, etc., Works.

By your order, handbills, etc., were distributed in the townships most affected with Scarlet Fever, detailing the penalties of wilful exposure, etc., and also giving a few plain directions of the symptoms present in infectious diseases, and the precautions to be taken.

DIPHThERIA AND MEMBRANOUS CROUP.—Twenty-one (21) cases of Diphtheria or Membranous Croup were notified to me during the year. Nine (9) cases were reported in the first Quarter, four (4) in the second, one (1) in the third, and seven (7) in the fourth Quarter.

Six (6) cases occurred in Duxbury, five (5) of which were in one house; four (4) in Heath Charnock, and one (1) or two (2) in several other townships. Six (6) cases were removed to the Isolation Hospital, one (1) of which died there. Six (6) Deaths occurred from this disease, giving a case Mortality of twenty-nine (29) per cent.

By your direction I had the water supply to one or two of these infected houses analysed, with the result that in one case the water was found to be unfit for drinking purposes.

One house infected with Diphtheria was found to be in a bad state of repair, and very damp, but this house has been put into a habitable condition by the owner.

By your order, I keep a supply of Diphtheritic Antitoxin for the use of any Medical Practitioner in your district. I have received a few applications for it during 1911.

No further arrangements have been made by you under the Diphtheria Antitoxin Order, 1910, of the Local Government Board.

TYPHOID FEVER.—Eleven (11) cases were notified to me during 1911, viz, seven (7) in the first Quarter, three (3) in the third, and one (1) in the fourth Quarter of the year. In Eccleston, Euxton, and Anderton there were two (2) cases each, and in five other townships one (1) each.

Three (3) cases were removed to the Isolation Hospital, and eight (8) cases were kept at their homes.

Four (4) patients died of Typhoid Fever, giving the case Mortality of thirty-six (36) per cent.

No drainage or other defect was found in any of these houses infected with Typhoid Fever, and only one (1) case occurred in any one house.

All of the houses infected with Scarlet Fever, Diphtheria, and Typhoid Fever have been visited and inspected by your Medical Officer and Sanitary Inspector, and the houses, clothing, bedding, etc., have been disinfected after the removal to Hospital or termination of the case by the Caretaker of the nearest Sewage Works. Disinfectants have also been supplied, not only in cases of infectious diseases, but for other purposes when necessary.

MEASLES has been prevalent in different townships at different times during 1911, and I have recommended the closure of schools (infant departments) as below:—

Hoghton Church School—February 1st to February 27th.

Brindle St. Joseph's School—March 20th to April 10th.

Mawdesley Church School—April 25th to May 15th.

Coppull Chapel-lane School—May 8th to May 29th.

Anderton St. Joseph's School—July 7th till August 8th.

Anderton, Adlington Council School—September 25th to October 16th.

When I receive information from the Head Teacher of a School, or from any other source, that Measles is becoming prevalent in a School, I visit that School and find out as far as possible how many children are suffering from Measles, and how many doubtful cases. If there are not so many cases that it makes it desirable to close the Infant Department, I request the Teachers to exclude not only those suffering from Measles for three weeks, but also all infants coming from the infected house. In the case of children in the upper schools, those children who have not previously had a definite attack of Measles and come from an infected house are required to be excluded for three weeks, but those children who have previously had Measles are allowed to attend School even when they come from an infected house.

If I find that there are thirty or forty per cent. of the average attendance absence on account of Measles, I recommend the Rural District Council to close the School.

Owing to the fact that Measles is highly infectious before the disease can be definitely diagnosed, I am very rarely informed of the existence of the disease until a large number of children are infected, and owing to the extreme carelessness of the parents and guardians of children suffering from Measles it is doubtful how far school closure is beneficial, as the children still capable of carrying infection are allowed to mix freely with healthy children.

Six (6) Deaths occurred from Measles during 1911.

DIARRHŒA AND ENTERITIS.—More than half of the Deaths in 1911 due to the seven principal Zymotic Diseases occurred from these diseases. Twenty-six (26) Deaths were registered from Diarrhœa, etc., during the year, sixteen (16) of which were in infants under one year of age, and five (5) in infants between one and two years. The Death rate from these diseases alone amounted to 1.2 per thousand.

More than half of the Deaths from Diarrhoeal Diseases occurred in Coppull, viz, fourteen (14).

The months of July and August, which will long be remembered as unusually hot, produced most of the deaths from Diarrhoea. I am firmly of opinion that the great prevalence of the House Fly during and immediately after the hot weather was the chief cause of the great number of cases of Diarrhoea, especially amongst infants. Until some more effectual means are adopted to destroy the breeding places of the House Fly and other harmful insects, great care should be taken by householders to cover all articles of food—especially such articles as milk, etc., in such a way as to prevent any access of Flies to the food, but to allow fresh air.

In addition, there ought not to be allowed any accumulation of refuse, especially animal or vegetable, stable manure, etc., near any inhabited dwelling, and all animal or vegetable garbage ought to be at once burned.

This complete destruction of garbage, whilst useful and sanitary in all weathers, is often a matter of life or death in very hot weather, especially in the case of very young children.

I think it would be advisable at the commencement of summer to have handbills distributed throughout the district, warning people of the danger of the House Fly.

PULMONARY TUBERCULOSIS.—Twelve (12) Deaths have occurred from this disease in 1911, as compared with seventeen (17) in 1910, and an average of seventeen (17) in the previous five years (1906-1910).

By your directions I have caused the rooms, etc., in which patients suffering from Phthisis have died to be disinfected.

In 1908 the Local Government Board issued a Memorandum authorising the notification of Phthisis Pulmonalis in the case of any person receiving parish relief or in a Workhouse. This was extended in 1911 to the cases treated as in-or-out patients of any Hospital.

From the commencement of 1912 all cases of Phthisis are required to be notified to the Medical Officer of Health of the Sanitary District in which they reside.

Now that it is so definitely known and recognised that Phthisis is an infectious disease it is thought necessary that this disease should be brought into a line with other infectious diseases, and that every attempt should be made to prevent the spread of infection, and also to remedy the predisposing causes, such as defective nutrition, insanitary and ill-ventilated dwellings, etc.

The great improvement in the sanitary condition of the country generally has produced a corresponding diminution in the number of cases of Consumption, and the more active steps taken in response to this order will, I believe, be most valuable in further reducing the Mortality from this scourge of civilisation.

Phthisis is not an incurable disease, a great proportion of cases of Consumption, if scientifically and thoroughly treated at the earliest stage, can be permanently cured, but if allowed to go on indefinitely there is a

very different result. The curability of Phthisis ought to be more widely known than it is, and the more knowledge in this direction is diffused the fewer cases of Consumption would appear on the Register of Deaths.

Upon receipt of a notification of Phthisis the Medical Officer of Health or a trained assistant has to visit the home of the Phthisical patient, examine the sanitary condition of the house, and, without any interference with the Medical Practitioner attending the sick person, give such directions as he may think necessary to prevent any spread of the infection.

This will be a difficult matter, and one requiring tact and discretion, so as not to offend the susceptibilities of the patient or others, and not in any way to interfere with the occupation of the sufferer.

I recommend that you should allow me to procure some handbills or pamphlets giving plain directions how to avoid the dissemination of the infection of Phthisis and other matters, so that I may either directly or through the Medical Attendant supply them to the cases notified to me.

I also recommend that in cases amongst the poorer classes you should authorise me to secure a bacteriological examination of the sputum of suspected cases of Phthisis, so that preventive action may be taken at the earliest time possible.

Your Council are empowered to provide spit-bottles or other suitable means for preventing the spread of infection, and also to disinfect rooms, etc., in which a consumptive patient has been residing. I recommend that you give me authority in both these directions in cases where I think it necessary, and where the circumstances do not warrant such duties being undertaken by the patient's friends and relatives.

As you will see at the end of my report, I have had to state what Hospital accommodation has been provided by you for the treatment of Phthisis, and also whether there is a Tuberculous Dispensary in connection with your Council.

The provision of a Tuberculous Dispensary is necessary only in the case of large towns, but Sanatorium or Hospital accommodation will sooner or later have to be considered by you, provided that the Joint Hospital Board, by a provisional Order, divest themselves of their exclusive right and duty, now incumbent on them, to provide Hospital accommodation for the treatment of Phthisis.

Until such provisional Order is made you have no power to provide any Hospital accommodation.

DISINFECTION.—The present means for disinfecting houses in which there has been a case of infectious disease is for me to send notice, upon the termination of the disease or removal of the infected person to Hospital, to the nearest Caretaker of your Sewage Works. Upon receipt of such notice he at once visits the house, sprays the bedding, clothing, and the walls, etc., with Formaldehyde solution, and fumigates the room with burning sulphur. In addition, the clothes, etc., are directed to be washed in a strong disinfectant solution supplied by your Authority.

As a rule, this method, though not a completely satisfactory disinfection, has very rarely failed in preventing the spread of infection in the house.

In addition, you have directed me to send in exceptional cases the bedding, clothing, etc., to Chorley to be disinfected by the steam disinfector belonging to the Borough, by arrangement with the Town Council.

I understand that this permission has been withdrawn by the Chorley Town Council, and if no arrangement can be made with that Authority, the question of providing a movable steam disinfector will have to be reconsidered by you, though, I fear, the cost of working it will be heavy, besides the initial expense, considering the wide area over which your jurisdiction extends.

SCHOOLS.—I have visited some of the Schools in your District during the year, more especially when there has been an outbreak of infectious disease amongst the scholars, and the question of recommending the closure of the School has arisen.

As I have stated under the headings of Measles and Scarlet Fever, ten (10) Schools were closed for a period during the year.

The School Inspection of Children under the Education (Administrative Provisions) Act is performed by the School Medical Officer for the County, as the Schools are under the management of the County Council.

As a rule the Schools in your district are in a good sanitary condition—well lighted, ventilated, and warmed—and where possible provided with the public water supply.

HOUSING AND TOWN PLANNING ACT (1909).—In my Report for 1910 I gave you a short resume of the provisions of this Act, and during 1911 a considerable amount of visiting and inspecting houses in localised areas has been carried out by your Inspector and myself.

I give in the following Table the result of the year's work:—

Number of Dwelling-houses visited	...	...	...	52
Number of Dwelling-houses unfit for habitation	...	...	...	1
Number of Dwelling-houses reported to Council for Closing Order	...	...	...	1
Number of Dwelling-house Closing Orders made	...	...	...	1
Number of Dwelling-houses in which defects were remedied without Closing Order	...	...	...	20
Number of Dwelling-houses put into a fit state for habitation after Closing Order	...	...	...	0
Number of Dwelling-houses demolished	...	...	...	0
Number of Dwelling-houses in which Water supply was defective	...	...	...	3
Number of Dwelling-houses in which insanitary Closets were present	...	...	...	9
Number of Dwelling-houses in which Drainage was defective	...	...	...	25
Number of Dwelling-houses in which Ventilation was deficient	...	...	...	29
Number of Dwelling-houses in dirty condition...	...	...	...	19
Number of Dwelling-houses in which Floors, Stairs, etc., were defective...	...	...	...	26
Number of Dwelling-houses in which were other defects	...	...	...	13

The Sanitary defects in twenty (20) houses have been remedied, and in other houses the work will be undertaken in early spring.

The question of drainage of Club-street, Euxton, is still under your consideration.

The census of the population of your district reveals an average of 4.7 inhabitants in each house. Consequently, throughout the district there is no overcrowding generally, and, in Coppull, where this condition used to be most apparent, overcrowding has been lessened somewhat by the erection of new houses.

In two or three townships, however, there is a deficiency of cheap houses for the labouring classes, and there is some overcrowding.

Your Officers intend to bring some cases before you during the ensuing year.

Speaking generally the houses have plenty of open space around them, are in a fair state of repair, and the drainage is in a satisfactory condition.

In five townships—Coppull, Heapey, Wheelton, Whittle, and Clayton-le-Woods—there are Bye-laws to which the newly-erected houses must conform, and plans for the erection of all buildings throughout your district are regularly submitted to you at your monthly meetings for your approval, but in the case of the remaining townships only as to drainage.

The supervision over the erection of new houses is in the hands of your Surveyor.

I give in the following Table a list of the new houses, farm and other buildings, the plans for which have received your approval during the year.

TABLE G.

Townships.					New Houses.	Farm Buildings.	Other Buildings.	Totals.
Charnock Richard...	...	...	...	...	6	...	1	7
Coppull	...	...	...	...	74	...	4	78
Duxbury	...	...	...	...	25	...	1	26
Brindle	...	...	...	...	...	...	5	5
Hoghton	...	...	...	..	1	...	...	1
Eccleston	...	...	...	...	22	...	2	24
Heskin	...	...	...	...	2	...	...	2
Mawdesley	...	...	...	...	1	...	1	2
Clayton-le-Woods	...	...	...	...	...	...	4	4
Cuerden	...	...	...	...	2	...	1	3
Euxton	...	...	...	...	4	1	4	9
Whittle-le-Woods	...	...	...	...	3	...	4	7
Anderton	...	...	...	...	6	...	...	6
Heath Charnock	...	...	...	...	23	1	...	24
Rivington	...	..	...	...	...	...	1	1
Totals ...					169	2	28	199

LODGING-HOUSES.—In your district there are no lodging-houses for casuals registered. In one or two townships weekly lodgers are taken by the householders, but these cases do not come under the category of lodging-houses.

WATER SUPPLY.—In fourteen (14) out of the twenty-one (21) townships of your district, there is a public water supply. The water supply for Coppull is obtained from the Liverpool Corporation through the Urban District of Standish.

From Manchester Corporation you obtain water supplies for three localities.

1. Heapey, Wheelton, Whittle-le-Woods, and Clayton-le-Woods.
2. Anderton and Heath Charnock.
3. Western district, comprising: Charnock Richard, Welch Whittle, Heskin, Euxton, Eccleston, Ulmes Walton, and Bretherton.

These supplies are good in quality and sufficient in quantity for domestic purposes, with perhaps the exception of the highest part of Heath Charnock (Scheme No. 2), where the pressure is sometimes not as good as might be desired.

With the view of remedying this you have visited the locality, and, by the advice of your Surveyor, have considered and adopted certain alterations in the delivery pipes, and also the construction of another reservoir, in view of the extension of the mains to the township of Duxbury.

The water supply to Duxbury has occupied a good deal of your attention during the year. A portion of this township is being laid out for building purposes, and you directed your Surveyor to prepare plans and estimates for the provision of a water supply to this district.

These were laid before the Local Government Board, and an Enquiry was held. Sanction to proceed with the work has been granted by the Board, and you have applied for the necessary loan.

The Carr Cottages at the other end of Duxbury are to be supplied with water from Liverpool through the Chorley Corporation.

WESTERN WATER SUPPLY.—Further extensions have been made in one or two townships during the year. In Ulmes Walton the main has been extended 260 yards along Ridley-lane, and you have agreed to extend the main in Euxton from Spout Hill Farm to German Farm on the owners undertaking to pay ten per cent. of the cost for ten years.

A considerable number of houses have been connected with the mains during the year, and your Inspector brings under your notice from time to time all houses in which a sufficient supply of good water is not available, where these houses are on the line of the mains.

I trust that in a very short time now all houses that can be supplied from the public main will be connected therewith, and thus a regular supply of good water, so essential for the health of the people, will be secured.

In the seven (7) remaining townships and in scattered portions of the townships with public water supplies, water for domestic purposes is chiefly obtained from wells and springs, and in only a few instances from rain water.

Some of these townships are tolerably satisfactorily supplied with water, whilst in one or two the supply is not so good.

DAIRIES AND COWSHEDS.—A slow but distinct improvement is taking place in the character of the Cowsheds and Dairies in your district.

In 1908 you formulated a series of Byelaws and Regulations, and your Officers are endeavouring to bring the Dairies and Cowsheds in line with these Regulations. As far as possible the worst cases have been attended to at the first, but this work will be proceeded with during the year.

I may again remark upon the necessity of bringing before the Cowkeepers and Milk Purveyors the absolute necessity of personal cleanliness and cleanliness of the vessels, etc., used for Milk.

I recommended in my Reports for 1908 and 1909 that handbills should be issued to all the Cowkeepers and Purveyors of Milk on the Register, containing short and simple instructions as regards cleanliness, etc. I still think it would be advisable to furnish all who sell Milk with such information, as more than any other article of food Milk is, perhaps, the most likely to be rendered injurious by the absence of cleanliness and by the carrying of contagion.

You have ordered that a copy of the Byelaws and Regulations should be sent to all the Dairymen and Cowkeepers in your district.

SCAVENGING.—In the following townships you have contracted with farmers, etc., to remove the contents of all privies, bogholes, etc., viz:—Coppull, Anderton, Heath Charnock, Euxton, Wheelton, Clayton-le-Woods, and Whittle-le-Woods. Also the cesspools at Bretherton and Mawdesley are emptied by contract with residents in these townships.

In these contracts the contractors are bound to empty the contents of the middens, bogholes, etc., at stated periods, and in general the work has been carried out to the satisfaction of your Officers.

You have authorised the Surveyor and myself to suspend the contractor in case of default, but we are glad to say that very few complaints have been made this year. In the other townships, where there is no contract, the onus of emptying the middens, bogholes, etc., lies on the occupier.

SEWAGE DISPOSAL WORKS AND DRAINAGE.—In the most populous townships you have systems of main drainage and sewage disposal works, whilst in the other townships and elsewhere where the main sewers cannot be laid owing to the configuration of the land, the household and farm sewage is conveyed into tanks or directly on to the surrounding fields, but the house drains are trapped.

COPPULL.—There are three sewage disposal works in this township, viz, Tanyard and Church-lane works, in both of which the sewage is treated by precipitation, filtration, and irrigation on land before the effluent is

turned into the stream. At the third outfall works, near the Grey Horse, the sewage is precipitated but not filtered.

HEAPEY AND WHEELTON.—The sewage is at these disposal works treated by precipitation, filtration, and irrigation over land.

WHITTLE-LE-WOODS AND CLAYTON-LE-WOODS.—The same process is carried out at these outfall works, but here you irrigate over land rented from a neighbouring farmer.

ECCLESTON AND EUXTON.—At these disposal works the sewage is precipitated, and there is a large area for irrigation at Eccleston, but that at Euxton is very limited.

ANDERTON AND HEATH CHARNOCK.—The sewage from these townships discharge into the sewers belonging to the Urban District Council of Adlington. You have a contract with this Council to treat the sewage of these townships.

There is also at Rawlinson-lane, Heath Charnock, a small outfall works, where the sewage is treated by precipitation and irrigation over land.

You have repaired sewers in one or two townships during the year, and through notices given by your Inspector forty-five drains, etc., have been put into order by the owners.

SLAUGHTER-HOUSES.—These have been regularly visited by your Inspector during the year, and also when he has received information he has visited and examined the carcasses of any cattle that have been slaughtered at farms. We have not seen any necessity for seizing any carcasses this year, but, of course, it is possible that some diseased cattle have been slaughtered and sold without any information having been conveyed to us. In several townships the slaughter-houses are under Byelaws and Regulations, which are carried out.

BAKEHOUSES.—There are only a few Bakehouses in your district, and these are generally in a satisfactory condition.

FOOD INSPECTION.—The County Police have taken the following samples of food and drugs under the Sale of Food and Drugs Act, and have submitted them to analysis by the County Analyst:—Milk, thirteen (13) samples, and one (1) sample each of Butter, Lard, Sugar, and Jam.

No case of adulteration was found to warrant prosecution of the sellers by the County Council. The samples were taken from seven townships in your district.

NOTIFICATION OF BIRTHS ACT.—This Act has not been adopted in your district, and with your present staff of Officers could not be satisfactorily worked.

MIDWIVES ACT.—This Act is carried out by the County Council officials, and a copy of the Quarterly Report of the County Medical Officer of Health is sent regularly to you.

OFFENSIVE TRADES.—There are no works of this sort in your district.

RIVERS AND STREAMS.—The Ribbleshead Water Committee carry out the work of the prevention of the pollution of streams and rivers in your district.

FACTORIES AND WORKSHOPS.—Some of the Factories and Workshops have been visited during the year by your Inspector, and I have accompanied him on one or two occasions. The defects found will be seen in the Factory Schedule accompanying this Report. H.M. Inspector has notified two cases of defective sanitary accommodation at two Factories in your district, and notices have been served upon the owners to remedy the defect.

The ordinary work of the year has been carried out by your Inspector, Mr. Froes, with ability and diligence..

I give in the following Table, Table H, a list of the nuisances abated and the sanitary improvements made during 1911. Most of these have been completed after the notices served by your Inspector, and only a small proportion have been required to be brought under your consideration with a view to statutory notice.

TABLE H.

TOWNSHIP.	Defective Drains Repaired, etc.	Houses Cleansed and Linewashed.	Houses with Structural Defects Repaired.	Privies Converted to Waterclosets.	Sanitary Dust Bins Provided.	Cowsheds Altered or Newly Erected.	Defective Water Supplies Remedied.	Overcrowding Abated.	Other Nuisances Abated.	TOTALS.
Anderton ...	3	...	1	...	...	...	...	...	4	8
Bretherton ...	6	4	...	...	...	...	13	1	...	24
Brindle ...	2	...	...	1	...	...	...	...	1	4
Charnock Richard	5	7	13	...	...	...	21	...	2	48
Clayton-le-Woods	...	...	...	...	...	...	...	...	6	6
Coppull ...	7	5	9	...	...	...	...	2	6	29
Cuerden...	...	...	...	...	...	...	...	...	2	2
Duxbury ...	1	...	...	...	...	...	...	...	2	3
Eccleston ...	3	...	...	...	...	...	29	...	4	36
Euxton ...	3	94	6	...	...	1	38	1	2	145
Heapey ..	...	...	...	...	...	...	...	...	6	6
Heath Charnock...	2	1	...	3	5	2	...	...	3	16
Heskin ...	1	...	...	...	...	...	11	..	2	14
Mawdesley ...	...	...	...	...	...	...	...	...	5	5
Rivington ...	...	...	...	...	...	...	...	...	1	1
Ulnes Walton ...	1	...	...	...	...	2	19	...	1	23
Welch Whitte ...	1	...	1	...	...	...	...	...	1	3
Wheelton ...	2	...	...	...	...	...	...	...	3	5
Whittle-le-Woods	8	1	...	...	8	...	...	...	12	29
Totals ...	45	112	30	4	13	5	131	4	63	407

I have the honour to be,

Gentlemen,

Your obedient Servant,

JAMES A. HARRIS.

TABLE I.
Vital Statistics of whole District during 1911 and previous years.

Year.	Population estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.		
		Number.	Rate.	Number.	Rate.	of Non- residents Registered in the District.	of Resi- dents not Registered in the District.	Under 1 Year of Age		At all Ages.
								Number.	Rate per 1000 Births Registr'd	
1	2	3	4	5	6	7	8	9	10	12
1906	20300	540	26.6	265	13.1	5	11	63	117	271
1907	20520	513	25.0	295	14.4	1	15	57	111	309
1908	20750	530	25.5	298	14.4	4	11	56	106	305
1909	20990	558	26.6	291	13.9	7	17	48	86	301
1910	21240	476	22.4	255	12.0	4	18	55	116	269
1911	21500	495	23.02	320	14.88	18	19	54	109	321
										14.93

Area of District in acres (exclusive of area covered by water), 39,983 ; Total population at all ages, 2,1494 ; Number of inhabited houses, 4,543 ; Average number of persons per house, 4 731, at Census of 1911.

TABLE II.

Cases of Infectious Disease notified during the Year 1911.

Notifiable Disease.	At all ages.	Total cases notified in each locality (e.g. Parish or Ward) of the District.					Total Cases Removed to Hospital.
		1 Chorley Sub-district.	2 Brindle Sub-district.	3 Croston Sub-district.	4 Leyland Sub-district.	5 Rivington Sub-district.	
Diphtheria (including Membranous Croup ...	21	9	...	4	4	4	6
Erysipelas ...	9	...	1	2	3	3	...
Scarlet Fever ...	151	7	12	87	41	4	98
Enteric Fever ...	11	3	...	4	2	2	3
Puerperal Fever ...	1	...	...	...	1	...	
Phthisis { Under Tuberculosis Regulations, 1908 Under Tuberculosis Regulations, 1911 Others ...	2	...	...	...	1	1	
	0						
	0						
Totals...	195	19	13	97	52	14	107

Isolation Hospital : Chorley Joint Hospital, Heath Charnock.

Total available beds, 36. Number of Diseases that can be concurrently treated, 4.

CAUSES OF DEATH.	DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.								Total Deaths whether of "Residents" or "Non-Residents" in Public Institutions in the District.	
	All Ages.	Under One Year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.		65 and upwards.
All causes { Certified ... Uncertified ...	310 11	53 1	15 ...	20 1	22 1	12 1	39 1	69 4	80 2	Isolation Hospital, HeathCharnock
Enteric Fever ...	4	...	...	...	...	1	2	1	...	...
Measles ...	6	2	...	2	2	...	...	...	...	...
Scarlet Fever ...	5	...	1	2	2	...	...	...	...	15
Diphtheria and Croup...	6	...	...	5	1	...	...	...	...	1
Influenza ..	1	...	...	...	...	...	...	...	1	...
Phthisis (Pulmonary Tuberculosis)	12	...	...	...	1	3	4	3	1	...
Tuberculous Meningitis	1	...	1	...	...	...	...	...	...	...
Other Tuberculous Diseases	11	1	...	1	3	...	5	1	...	...
Rheumatic Fever	2	...	...	...	...	...	1	1	...	...
Cancer, Malignant Disease	20	...	...	...	...	...	2	9	...	...
Bronchitis ...	23	4	1	1	1	...	2	2	12	...
Broncho-Pneumonia	9	3	3	...	...	...	...	1	2	...
Pneumonia (all other forms)	19	2	2	2	2	...	4	4	3	...
Other Diseases of Respiratory Organs	6	...	...	...	3	...	...	1	2	...
Diarrhoea and Enteritis	26	16	5	1	...	1	...	1	2	...
Appendicitis and Typhlitis	2	...	...	...	1	...	1	...	...	...
Cirrhosis of Liver	5	...	...	...	...	...	2	2	1	...
Nephritis and Bright's Disease	8	...	...	...	...	1	2	4	1	...
Congenital Debility and Malformation, including Premature Birth	17	17	...	...	...	...	...	...	...	...
Violent Deaths, excluding Suicide	11	...	...	1	5	2	2	1	...	...
Suicides...	3	...	...	...	...	...	1	2	...	...
Other Defined Diseases	87	5	...	5	1	3	11	36	26	...
Diseases ill-defined or unknown	37	4	2	1	1	2	1	4	22	...
	321	54	15	21	23	13	40	73	82	16

TABLE IV.
INFANTILE MORTALITY DURING THE YEAR 1911.
 Nett Deaths from stated causes at various Ages
 under One Year of Age.

Cause of Death.	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total deaths under one year
All Causes—										
Certified	10	3	6	1	20	8	11	5	9	53
Uncertified ... ..	...	...	...	...	...	1	...	...	...	1
Measles ... ..	...	...	...	...	...	...	...	...	2	2
{ Diarrhoea... ..	...	...	...	...	...	...	3	...	1	4
{ Enteritis ... ..	...	...	1	...	1	3	2	2	4	12
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	1	1
Congenital Malformations	1	...	1	...	2	1	...	...	...	3
{ Premature Birth... ..	5	1	1	...	7	...	...	...	...	7
{ Atrophy, Debility, and Marasmus	1	1	1	1	4	...	2	1	...	7
Injury at Birth	1	...	...	...	1	...	...	...	...	1
Syphilis ... ..	...	...	...	...	...	1	...	...	...	1
Convulsions	1	...	...	...	1	1	...	...	...	2
Gastritis ... ..	...	...	1	...	1	...	...	...	...	1
Bronchitis ... ..	...	...	1	...	1	...	3	...	...	4
Pneumonia (all forms) ...	...	...	...	...	...	1	1	2	1	5
Other causes	1	1	...	...	2	2	...	...	...	4
	10	3	6	1	20	9	11	5	9	54

Nett Births in the year : Legitimate, 482 ; Illegitimate, 13. Nett Deaths in
 the year of : Legitimate Infants, 51 ; Illegitimate Infants, 3.

Inspection of Factories, Workshops, and Workplaces.

Including Inspections made by Sanitary Inspector or Inspector of Nuisances.

	Inspections.	Written Notices.
Factories (including Factory Laundries).....	5	2
Workshops (including Workshop Laundries)	18	0
	—	—
	23	2

Defects found in Factories, Workshops, and Workplaces.

Nuisances under the Public Health Acts :—	Found.	Remedied.
Want of Cleanliness.....	3	3

Total number of Workshops on Register ... 14

Other Matters.

Matters notified to H.M. Inspector of Factories :—

Failure to affix Abstract of the Factory and Workshop Act (s. 133)	1
Notified by H.M. Inspector.....	2

Phthisis: Sanatorium and Hospital Accomodation.

There is no Sanatorium or Hospital Accommodation for the treatment
 of Phthisis. The Guardians of the Poor have occasionally sent Phthisical
 Patients (Paupers) to a Sanatorium at Sandgate, at a charge of £1 1s. 0d.
 per week—last year three cases—and one was sent to Horsforth, at
 £1 10s. 0d. per week. All early or intermediate cases. The Council, or any
 Private Body, have not provided a Dispensary.